SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	4	50 OF	6	6404
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL CO	MMITTEE				
Full Name (Last, First, Middle Initial) MR. RICHARD W. PASCOE	Date of Receipt				
Mailing Address P.O. BOX 86	10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: 2015M11L11AI00564			
ELK RAPIDS	MI 49629-0086	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
RETIRED	RETIRED				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	850.00				
Full Name (Last, First, Middle Initial) MR. JAMES P. LEONARD	Date of Receipt				
Mailing Address P. O. BOX 771084		10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code AK 99577-1084	Transaction ID : 2015M11L11AI00565			
EAGLE RIVER		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer RETIRED	Occupation				
RETIRED Receipt For:	RETIRED				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00				
Full Name (Last, First, Middle Initial) . MR. CARL STECKLEIN	Date of Receipt				
Mailing Address 6600 FAIRDALE DRIVE AP	10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City SAN ANTONIO	State Zip Code TX 78218-3632	Transaction ID : 2015M11L11AI00566 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation				
REQUESTED	REQUESTED				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	231.00				
SUBTOTAL of Receipts This Page (optional)		400.00			
TOTAL This Period (last page this line number	<u> </u>				